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		Attorney Docket N	umb	HUBR 12	.06				
DECLARATION	1 FOR	First Named Inven	tor	Schuhbauer	, et al.				
UTILITY OR DE	SIGN	COMPLETE IF KNOWN							
PATENT APPLIC		Application Number							
·	-	Filing Date		<u> </u>					
1 70	daration bmitted after	Group Art Unit							
with Initial Filing Initi	al Filing	Examiner Name		· · · · · · · · · · · · · · · · · · ·					
As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is fisted below) or an original, first and joint inventor (if plural names are fisted below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Sustained release form (retarded release form) comprising alpha-lipoic acid (derivatives) (Title of the Invention)									
is attached hereto OR Vivas filed on (MW/DD00000 Soption has 20, 2000) as United States Application Number or PCT International									
Za marina an (minosari i i i ja	x was filed on (MMVDDYYYY) September 29, 2000 as United States Application Number or PCT International								
Application Number PCT/EP 00/09585 and was amended on (MM/DD/YYY) November 16, 01 (# applicable).									
I hereby state that I have reviewed and us amendment specifically referred to above	nderstand the contents o	of the above identified spec	ification, including	the claims, as amen	ided by any				
I acknowledge the duty to disclose inform	ation which is material to	o patentability as defined in	Title 37 Code of f	ederal Regulations,	§1.56. ·				
I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DDYYYY)	Priority Not Claimed	Certified Cop YES	y Attached? NO				
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Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:									
	I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.								
Application Number(s)	IM/DD/YYYY)	1 1	nal provisional ion numbers	-					
are listed on a supplemental priority sheet attached hereto.									

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DECLARATION Hillity or Design Patent Application

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Additional registere	d practitioner(s) named	on supplemental	Registered F	ractitioner Ir	nformation sh	et PTO/S	8/02C	attached here	to.
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Name F	ulbright &	Jaworski	L.L.	Ρ					
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City N	ew York			State	NY	ZIP	IP 10103		
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Name of Sole or	First Inventor:			A petitk	on has been	filed for	this u	nsigned inve	entor
Given Na	me (first and middle	[if any])			Famil	y Name	or Sur	паме	
Hans.	Schuhbauer								
Inventor's Signature	x fl dell							Date	× 14/02/02
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Additional invent	rs are being named	on thesu	pplemental	Additional	Inventor(s)	shoct(s)	PTO/	SB/02A attac	ched herete



Type a plus sign (+) inside this box + **DECLARATION** ADDITIONAL INVENTOR(S) Supplemental Sheet Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Middle Family Ivo Name Sutfix <u>Pischel</u> Name Inventor's Signature Residence: DEXCountry Trostberg State Citizenship City Germany Post Office Address Sonnenleite 6a, 83308 Trostberg, Germany Post Office Address City State ZΙρ Country Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Bernkop-Schnürch Name Inttal inventor's Signature Residence: City Country Wien ATIX Citizenship Austria Post Office Address Althanstrasse 14, 1090 Wien. Post Office Address City State ΖΙp Country Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Glv Middle Family Suffix Name Inventor's Date Signature Residence: State Country Citizenship Post Office Address Post Office Address City State Country Name of Additional Joint Inventor, if any: A peution has been filed for this unsigned inventor Given Middle Family Suffix Name Name inventor's Signature Date Residence: State Citizanship City Country Post Office Address Post Office Address City State Country ZΙρ Additional inventors are being named on supplemental sheet(s attached hereto

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